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Approved for use through 7/31/2008, OAIS 0551-009
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Under the Paperwork K	BOUGUON PACE C	91 1995, 6	e bessore mase	divised to uesbour	to a consection of	niomation un	ess it disp	tays a valid OMB	control number
PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Applic	gliop or Docket N	784
CLAIMS AS FILED - PART I (Column 1) (Column 2)					SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
FOR NUMBER FILE		ER FRED	NUM	BER EXTRA	RATE	FEE]	RATE	FEE
BASIC FEE (37 CFR 1.15(e))			-			3	OR		3
(D) CFR 1.16(c))		minus 2			x 1		OR	X 5 .	
INDEPENDENT CLAMS	·	minus .	3 = .		X		oa.	x 1	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))					1	1	OR		
'if the difference in column 1 is fess than zero, enter "O" in column 2.					TOTAL	 	OR	TOTAL	
1	- PART II			J 07	TOTAL				
CLAIR	NO AS ANI	ENUCU) - PARI II	•	•				
(0	Column 1)		(Cotumn 2)	(Column 3)	SMALL	ENTITY	OR -		R THAN · ENTITY
# I "CARION	CLAIMS EMAINING AFTER ENOMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	AVDO!
Total	29	Minus	30	•	x 5	1			FEE
Z Independent	4	Miryes	- \(\tau_{\tau} \)	1-1-	X 1	 	OR	× 3	_
FIRST PRESENTATION OF MALTIPLE DEPENDENT CLAIM (27 CFR 1.18(9))						 	OR .	× 4	-
				TOTAL	1	OR	TOTAL	-	
E .				-	ADDI-FEE	4	OR	ADOL FEE	
	OBJERN 1)		(Column 2)	(Cotumn 3)			1		
주기 C-4 시 RE	MAINING AFTER ENOMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		PATE	ADDI- TIONAL FEE
Total Total GI CFR 1.14(c) Independent GI CFR 1.14(c)	9	Minus	<i>" 30</i>	.0.	x 5 •		OR	X 5 2	
T budebandens .	4	Minus	7	18	x s o		OR	×1 -	
FIRST PRESENTATION OF MILITIPLE DEPENDENT CLAIM (IN CFR 1.18(4))					. :		OR	+;	
				 1	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
	ohumen 1)		(Catuma 2)	(Column 3)	<u> </u>				
O A A RE	LAIMS MAINING AFTER MOMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
Total (DICTAL SEA)		Minus	30	.00	x 5 =	 ,	oa l	x	FEE
III (31 CFR 1.160))	4	Minus	··· 4	· = 0	X 9 *	-//	OR	x 3	
FIRST PRESENTATION		-/-	og l						
	TOTAL ADOL FEE	/_	OR E	TOTAL					
* If the entry to column ** If the "Hobest Number	1 is less than	the entry	in column 2, will	e To to column 3.			UR	ADD'T FEE	
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".									

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time our require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.D. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.